

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Computer Readable Form (CRF)?::	No
Title::	COMPENSATING LIQUID DELIVERY SYSTEM AND METHOD
Attorney Docket Number::	080219-0103
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	6
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Burton H.
Family Name::	Sage
Name Suffix::	Jr.

City of Residence:: Vista
State or Province of California
Residence::
Country of Residence:: USA
Street of mailing address:: 3430 Bernardino Lane
City of mailing address:: Vista
State or Province of mailing CA
address::
Postal or Zip Code of mailing 92084
address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: David
Family Name:: Gillett
City of Residence:: San Diego
State or Province of CA
Residence::
Country of Residence:: USA
Street of mailing address:: 17838 Weaving Lane
City of mailing address:: San Diego
State or Province of mailing CA
address::
Postal or Zip Code of mailing 92127
address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Brian

Family Nam :: Catanzaro
City of Residence:: San Diego
State or Province of CA
Residence::
Country of Residence:: USA
Street of mailing address:: 5147 Pacifica Dr.
City of mailing address:: San Diego
State or Province of mailing CA
address::
Postal or Zip Code of mailing 92109
address::

Correspondence Information

Correspondence Customer Number:: 22428
E-Mail address:: PTOMailWashington@FoleyLaw.com

Representative Information

Representative Customer	22428	
Number::		

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::

Therafuse, Inc.